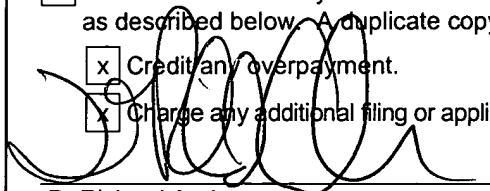
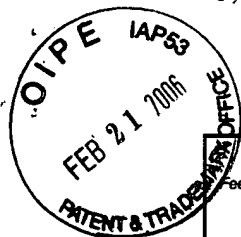


2/21/06
AF#

MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AMENDMENT TRANSMITTAL LETTER				Docket No. H0001347 BSKB: 2929-0148P																																											
Application No. 09/873,698-Conf. #4771		Filing Date June 4, 2001		Examiner M. O. Sy																																											
				Art Unit 3683																																											
Applicant(s): Slawomir T. FRYSKA et al.																																															
Invention: COMPOSITE FRICTION DISC WITH STRUCTURAL CORE AND REFURBISHABLE LINING ELEMENTS																																															
<div>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</div> <div>Corres. and Mail BOX AF</div>																																															
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.																																															
<table border="1"><thead><tr><th colspan="6">CLAIMS AS AMENDED</th></tr><tr><th></th><th>Claims Remaining After Amendment</th><th>Highest Number Previously Paid</th><th>Number Extra Claims Present</th><th>Rate</th><th></th></tr></thead><tbody><tr><td>Total Claims</td><td>12</td><td>- 20 =</td><td></td><td>x</td><td></td></tr><tr><td>Independent Claims</td><td>3</td><td>- 4 =</td><td></td><td>x</td><td></td></tr><tr><td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td><td></td></tr><tr><td colspan="5">Other fee (please specify): Extension for response within first month</td><td>120.00</td></tr><tr><td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td><td>120.00</td></tr></tbody></table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	12	- 20 =		x		Independent Claims	3	- 4 =		x		Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify): Extension for response within first month					120.00	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					120.00
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TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					120.00																																										
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity																																															
<input type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. 02-2448 in the amount of \$ _____ A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> A check in the amount of \$ 120.00 is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
 D. Richard Anderson Attorney Reg. No.: 40,439				Dated: February 21, 2006																																											
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8035																																															



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<i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/873,698-Conf. #4771
		Filing Date	June 4, 2001
		First Named Inventor	Slawomir T. FRYSKA
		Examiner Name	M. O. Sy
		Art Unit	3683
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	H0001347 BSKB: 2929-0148P
TOTAL AMOUNT OF PAYMENT		(\$)	120.00

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
12		- 20 =	x	=	Fee (\$)		Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
3		- 4 =	x	=			
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
_____	- 100 =	/50 _____ (round up to a whole number) x		=			
4. OTHER FEE(S)							
Non-English Specification, \$120 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): \$125 Extension for response within first month						120.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	40,439
Name (Print/Type)	D. Richard Anderson	Telephone	(703) 205-8035
		Date	February 21, 2006